2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N48271

Entity Name: FARBER FAMILY FOUNDATION, INC.

Current Principal Place of Business:

1845 WALNUT STR
STE 800
PHILADELPHIA, PA 19103

New Principal Place of Business:

Current Mailing Address:

1845 WALNUT STR
STE 800
PHILADELPHIA, PA 19103 US

New Mailing Address:

1845 WALNUT STR
STE 800
PHILADELPHIA, PA 19103

FEI Number: 65-0336266 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARBER, JACK
3056 MIRO DRIVE NORTH
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

FARBER, JACK
3056 MIRO DRIVE NORTH
PALM BEACH GARDENS, FL 33410 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JACK FARBER 04/27/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FARBER, JACK
Address: 1845 WALNUT STR STE 800
City-St-Zip: PHILADELPHIA, PA 19103

Title: D ( ) Delete
Name: FARBER, VIVIAN
Address: 1845 WALNUT STR STE 800
City-St-Zip: PHILADELPHIA, PA 19103

Title: D ( ) Delete
Name: FARBER, DAVID M.
Address: 1845 WALNUT STR STE 800
City-St-Zip: PHILADELPHIA, PA 19103

Title: D ( ) Delete
Name: KURTZMAN, ELLEN B
Address: 1845 WALNUT STR STE 800
City-St-Zip: PHILADELPHIA, PA 19103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FARBER, JACK
Address: 1845 WALNUT STR STE 800
City-St-Zip: PHILADELPHIA, PA 19103

Title: D (X) Change ( ) Addition
Name: FARBER, VIVIAN
Address: 1845 WALNUT STR STE 800
City-St-Zip: PHILADELPHIA, PA 19103

Title: D (X) Change ( ) Addition
Name: FARBER, DAVID M
Address: 1845 WALNUT STR STE 800
City-St-Zip: PHILADELPHIA, PA 19103

Title: D (X) Change ( ) Addition
Name: FARBER, ELLEN B
Address: 1845 WALNUT STR STE 800
City-St-Zip: PHILADELPHIA, PA 19103

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELLEN B. FARBER D 04/27/2009
Electronic Signature of Signing Officer or Director Date